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## THE HOSPITALS OF LONDON.

FROM THE EDITORIAL CORRESPONDENCE OF THIS JOURNAL.

THE hospitals of London are both numerous and excellent. With the growth of the great city in which they are located, from an early period of its history, persons of wealth, liberality, and sterling christian benevolence, have contributed generously for the support of these important institutions. Some idea of the claims to antiquity of one of them (St. Bartholomew's) may be gathered from the fact that it came into tangible existence seven hundred and forty-eight years ago—having been founded by one Rahere; and three hunded and fourteen years later, received an act of incorporation, in the reign of Henry VIII. Instead of being a single edifice, there are several, so connected together that there is not anything very imposing in the appearance, and yet the spectator is struck with the extent of the architectural disposition, and the venerable indications of each stone in the cluster of buildings. Fortunately, nearly if not all the London Hospitals embrace, within their walls, fine open grounds, which leads to the supposition that, when established, they were in the outskirts of the town, beyond the boundaries of dwelling houses; and land being of small value, as much was enclosed as was supposed could ever be needed in the future progress of the charity. Population, however, crept gradually on and beyond, till many of them are now in the most crowded parts of the city. The Foundling Hospital is one of those which both astonish and delight the stranger with the beauty and extent of the grounds, in a place, too, where the land must be immensely valuable. Should it become worth a hundred pounds sterling a foot, no fear is apprehended that the charming green field set apart for giving air and safe exercise to foundling children, will be given up to the spirit of enterprise, and be covered with brick and mortar. What it now is, it will continue to be for centuries to come. In our rapidly increasing American cities, where utility is the doctrine most encouraged, and the organ of veneration is the last to be nursed, no broad acres set apart for the same purposes would be allowed to remain, unless they happened to be corporation property, or placed by the legislature in such state that no price could buy them.

A statistical dissertation on the wealth, the number of patients or pupils of St. Bartholomew's, is not called for in the notes of a traveller, because all such items are the common-stock articles of guide books and

topographical memoranda of old European cities. Mr. Lawrence, of distinguished surgical ability, and known, too, in the United States extensively as an author, is the leading operator. Mr. Stanley is another well-known surgeon. They, as well as the other professional gentlemen connected with the hospital, seem to be indefatigable in their attentions to visiters. If a stranger goes to the entrance and asks permission to examine the interior, he is freely permitted to go wherever he likes. There is no hesitancy, no putting off to a certain hour of an inconvenient day. This is gratifying to a tourist, whose very minutes must be economically expended. So it is with all the others—and if requested, a pupil or curator accompanies, to explain what would not otherwise be readily understood. Even the cabinets and all the museums of the London hospitals are accessible to every body, at any hour. This has a beneficial influence upon the public mind; and beyond a doubt, the sight of what has been carefully preserved in these collections, for the purpose of teaching new comers into the ranks of an arduous profession, the appearance and nature of diseased action, that they may be the better able to control the same morbid conditions, should they occur in their practice, has induced many to give freely and cheerfully for the maintenance of institutions of such vast importance to mankind. It would be highly creditable to the faculty of the Medical College in Boston, to say to the public that the museum was open to all, daily, from morning to evening. Such generosity would be appreciated. It would both increase the reputation of the College abroad, through the influence of strangers, and make its merits understood by the citizens. Were the same policy pursued in regard to the cabinet of the Society for Medical Improvement, in Tremont Row, it would redound to its prosperity. In England and France the discovery was long since made, that in science there should be no mystery—no blue chambers. Let all the people gratify their curiosity by seeing whatever has been collected to illustrate the progress of knowledge. Those who have the immediate oversight of these places and things, usually meet all propositions for a more liberal system, by saying that no objections are in the way; that those wishing to inspect their museums can always have the privilege by calling on this member or that. But this is just the process by which they are kept under a perpetual lock and key. Strangers to the crooked, narrow streets of some of our cities can scarcely thread their course to a hotel —much less hunt out the name and residence of a curator, a secretary, or some one else in authority, who can open a door, yet cannot waste his precious time in answering questions. Let a student always be in the apartment to facilitate inquiries—hundreds of whom would be thankful for the position. Happily, the Boston Natural History Society is beginning to appreciate the full excellence of open doors, by allowing its museum (exceedingly rich, even when compared with several in Scotland, Ireland, and some in England, which are held up as models) to be opened once a week. The next improvement will consist in never allowing it to be closed any hour in the week.—To return to the subject of Bartholomew's Hospital; the mere statement that the expenses, annually, are not far from 30,000 pounds, conveys an idea of the mag-

nitude of the establishment. Five thousand patients have been received in a single year. It is also a medical school of high reputation. Dr. Radcliffe, of ancient renown, gave the institution 200 pounds per annum, forever, to improve the diet and linen of the inmates. In walking over the tiled floor of St. Mary's Church, at York, one of the tiles was found lettered thus—"John Radcliffe, M.D., died Nov. 1, 1714."

*Guy's Hospital*—founded in 1721 by a bookseller, whose statue is placed in front, and who gave it at the commencement 18,700 pounds, and at his death 219,499 more, possesses peculiar advantages, from its great resources. It has about 530 beds—besides a great crowd of out-patients, who quite fill the door-ways and receiving rooms on the days for obtaining advice. Religious services are performed twice daily, in the chapel, where there is a second fine statue of Mr. Guy, which cost one thousand pounds sterling. This hospital, too, has, or rather is, a medical and surgical school, having at this particular time, attending its summer course of lectures, 300 students. Mr. Cooper and Mr. Cock, well-known operators, are the surgeons, with whom others are associated. Drs. Addison, Babbington and Barlow, physicians, have attained equal rank in their department. Dr. Gall, a young lecturer on comparative anatomy, promises to become a favorite with the classes, and with the learned generally. He unites blandness and kindness of manner with a happy, fluent delivery of words, which cause his lectures to be remarkably captivating. In like manner Mr. Faraday's lectures on chemistry, at the Royal Institute, are thronged by the first and ablest men, because there is a charm in his method of illustration, seldom elsewhere to be found. Think of that Hercules of science lecturing upon the beauties and constitution of a candle, or captivating a vast audience of the first class of intellects in London, by a public discourse on *boiling a pot!* His simplicity, his activity—for he rapidly throws out ideas, and keeps his hearers in fine humor, so that clapping is a frequent event—is the whole secret of his universal celebrity. More of him, however, on a subsequent occasion.

Among the articles of the museum at Guy's, is a series of wax illustrations of diseases of the skin, exceedingly life-like. The collection of morbid specimens is prodigiously large, and at the rate it is filling up, all the buildings within the enclosure will in time be required to display it advantageously. A new wing is now being erected to receive the collection of skeletons of the lower animals. The wards of Guy's will not compare with those of the Massachusetts General Hospital. Nor is there a hospital in Great Britain that can compare with the interior of that institution. It might be curious, by way of pastime, on a convenient occasion, to compare it, in regard to comforts and conveniences, with hospitals of renown on this side of the Atlantic.

Room—out-door space in abundance—characterizes Guy's Hospital, as it does all the others. A fountain, too, throwing a sparkling jet, near a green-house, has a fine effect, and cannot be otherwise than beneficial, on various accounts, to the convalescing subjects of the wards, who roam about in the shade to enjoy the beauties and blessings of fresh air, blooming flowers and flowing water. All the lecture rooms exa-

mined, thus far, in hospitals and colleges, are ugly and shabby. So it is in respect to operating theatres—they are lacking in elegance, perhaps in some degree from age; but the coarse benches and hard-bottomed chairs, the floor in the centre with no carpet to subdue the tread of assistants—a source of annoyance to all listeners—do not comport with the resources of any of them, or the individual pecuniary ability of those who figure in them. In the museum of Guy's, the models of tumors, and the portraits of patients who were the victims to formidable ulcers, and other uncontrollable maladies, are studies not to be overlooked. Specimens of all kinds, in spirit, appear to be kept in good order—the glasses being full, clear, and critically labelled.

*St. Thomas's Hospital.*—This is near Guy's, has 485 beds, enjoys the confidence of the corporation of London; and although not possessed of estates like its neighbor, has funds that yield, with some assistance from the wealthy, enough to meet all expenditures, which average annually not far from 15,000 pounds. Persons accidentally injured are admitted at all hours, as at the other hospitals. The museum is choice, but smaller than Guy's. Some of the models in wax, of tumors on the neck and neighboring regions, together with fac simile exhibitions of scrotal enlargements, venereal ulcerations, anal vegetations, &c., indicate the attention of the surgeons, and their ambition to preserve the memorials of their practice, for the instruction of those who may resort there for studying morbid anatomy. Dr. Bennett is a prominent physician at St. Thomas's. It would be retailing stale news to repeat what is already known of him, as a writer, wherever medical works are circulated.

*St. George's Hospital*—an imposing edifice—has a grand front of 180 feet in length, facing a noble park. The theatre will comfortably seat only 160 students. There are 16 wards, with 317 beds. Each of these hospitals—which, by the way, are at different parts of the city, remote from each other—has a bevy of students. Some have more reputation than their neighbors, and consequently have more pupils—this depending upon the out-door professional standing of the faculty. Dr. Robert Lee, Mr. Hawkins and Mr. Keat, are brilliant luminaries. Although the latter gentleman is nearly 80 years of age, he still evinces an unabated interest in surgery. What is to be the destiny of the army of medical students now in London, independent of whole squadrons of them in various parts of the empire, is a question. Without a friend at court, and a powerful one, too, backed up by another influence of acknowledged potency, it is impossible to enter either the army or navy. Government is surfeited with supernumeraries, and hence the prospect is small in that direction. In the country towns, the ground is fully occupied, as in the United States. Still the multitude of ambitious expectants is perpetually increasing.

*Middlesex Hospital* was instituted for the relief of lying-in married women, and the sick and lame generally, besides giving both advice and medicine to the indigent on specified days. Cancer patients, through the munificence of an individual, are permitted to remain through life, unless they request a discharge. Accommodation for 300 patients shows that charity is not given in small measure. The full complement is not

always present. Applicants at the receiving rooms for advice and medicine, constitute a remarkable feature in its round of business. A view of the multitude of men, women and children, rushing to the hospitals in London, in the character of out-door patients, demonstrates a point worth remembering, viz., that the people are either extensively diseased, or medicine is often taken when not needed. With regard to the latter, it is believed that if nine tenths of these patients would eschew medicine entirely, their prospects for improved health would brighten. Here, as in America, the unreflecting, ignorant and indolent, are the greatest drug consumers. It is an elevated amusement to take advice, and a habit to be under the influence of the whole materia medica. Our physicians have commenced a long-called-for revolution, in impressing upon their patients that medicine should never be taken if it is possible to do without it—it being a well-established truth that knowing and advising when to avoid it constitutes the successful practitioner.

Middlesex Hospital has a quiet, unobtrusive air. The grounds are limited to a hollow square, called the garden, yet there are enough for comfort. The museum of the University School, occupying two apartments, one of which is large, with a gallery on all sides, contains a splendid collection of anatomical specimens in wax, through the ingenuity of a father and son, in the employment of the establishment, which rather throws the Middlesex cabinet into the shade, although quite respectable for reference. Some of the wax representations of the gravid uterus are unsurpassed—they are equal to nature herself. Dr. Freer is at present lecturing on midwifery to a small class.

*University College Hospital.*—A broad scheme for superiority appears to have been contemplated in the organization of the University. On one side of Gower street is the academical department, unfinished, and on the other the hospital. Its internal arrangements are unexceptionable. There was particularly noticed, water-beds and pillows—highly prized by the patients, especially those suffering from psoas abscess, tenderness of the limbs, &c. About 120 patients can be properly provided for. A spirometer for measuring the capacity of the chest, simple in construction, and more correct than any other instrument of the kind, was observed at the head of a bed. Mr. Hooper, of London, is the manufacturer of the hydrostatic beds and cushions, which should receive more attention on the other side of the Atlantic. In the museum just referred to, there is a series of magnified models of the brain, much better than the real one for demonstrating in a school. These, as well as all the other wax preparations, were the handy workmanship of the two Tusons. No mercurial lymphatic injections, seen thus far in Great Britain, excel those in this neatly-kept collection, where a curator is always devotedly enlarging it by his tact and industry.

While prosecuting inquiries and visiting the medical and surgical charities, generally, the school for Indigent Blind came under observation, which bears a strong resemblance, in its details, to the Asylum for the same unfortunate class of fellow beings at South Boston. Julia Brace and Laura Bridgeman are familiar names to inmates here.

There are multitudes of dispensaries, ophthalmic and other institu-

tions, in London, claiming the attention of a medical stranger; but to particularize the value or transactions of each, would be a tedious effort. All similar institutions in the United States have, in the main, been copied from these, and they are equally well conducted, efficient, and worthy of the support of those intelligent communities in which they are established. Age, the progress of which cannot be retarded, will ultimately raise them to an equal rank in the estimation of foreigners. Everything in them is youthful. A period will certainly arrive with us when all departments of science, literature, and the arts, will vie with the present more advanced conditions in Europe, however distant it may appear to the learned of the mother country.

After a careful examination, it may be said that with all the presumed and admitted advantages for medical study in this magnificent capital, the facilities in most respects are quite equal in Boston, Philadelphia and New York. A more preposterous apology for going abroad, so far as England is concerned, was never devised. It is susceptible of demonstration that American students are more industrious at home than on their arrival in Europe. At the moment of writing, it has been stated, on reliable authority, that anatomical pursuits are conducted here with extreme difficulty, on account of the scarcity and expense of subjects. When the limbs retail for ten shillings apiece, poor students become economical of *materiel*. Not an individual dying in a hospital is taken for the theatre. Prisons and work-houses are exclusively the sources of supply. If friends claim the body, the schools cannot be supplied with it.

The queries have not unfrequently obtruded themselves—Is surgery or medicine more successfully practised in Great Britain, than in the States? Are more lives saved by such agencies, in a given number of patients? Is life held to be as precious in the great hospitals, where the population is exceedingly dense, as in the elementary cities and in all places at home? These are questions to be deliberately answered on a proper occasion.

One decided improvement, the commencement of a needed change in the mode of writing prescriptions, is gaining ground with the leading, or rather eminently-distinguished physicians here, viz., the practice of specifying every article, and the manner it is to be used, in plain English, thereby avoiding all mistakes in putting up drugs or in their administration. Some years since the same intelligence was announced through the present medium, by a reference to the prescriptions of Sir James Clark; but the blind still prefer to lead the blind, and the more mysterious or unintelligible the art of prescribing, the more it is prized by persons who imagine wisdom is always to be concealed. If some of the prominent American practitioners had the moral courage to adopt this common-sense course, others would follow.

## SKETCHES OF EMINENT LIVING PHYSICIANS.—NO. XVII.

### CHARLES A. LEE, M.D., OF NEW YORK.

"'Tis known, I ever
Have studied physic, through which secret art,
By turning o'er authorities, I have
(Together with my practice) made familiar
To me and to my aid, the blest infusions
That dwell in vegetives, in metals, stones;
And I can speak of the disturbances
That nature works, and of her cures; which gives me
A more content in course of true delight
Than to be thirsting after tottering honor,
Or tie my treasure up in silken bags,
To please the fool and death."—PERICLES, *Shakspeare.*

"A soul as full of worth, as void of pride,
Which nothing seeks to show, or needs to hide."—*Pope.*

THERE is a simplicity and oneness of purpose about a real student of nature, very different from the showy pretensions of those who make a smattering of natural science the stepping-stone to notoriety and wealth. The true student of nature, like the true lover, prizes his object for its own sake, and not on account of any accidental advantages which may accompany the pursuit of the object of his affections. His soul fires up his eye on receiving from nature any new thought or idea, and it is cherished in his heart of hearts as a jewel, on the careful preservation of which his very life depends. These men have hearts to encompass the world "and all that in it is." Talk of keeping them in the beaten track and just line of authorized precedent!! They know no such line, they acknowledge no such precedent, but proceed straight forward, guided by a controlling instinct and high love of nature in all her varieties. Disease in its Protean forms has to them the charm of poetry; plants, minerals, air, earth and water, are their friends and familiars. Who can measure the delight, not to say rapture of a Linnæus or a Humboldt, as he stands upon some towering peak of the Alps or Andes, and gradually takes in, by the force of an educated eye, the varied scenery of shrub, of moss, fungus, tree, rock, mountain, cataract, river, beast, valley, light, shade, and all the bright host of heaven, with each and all of which he is familiar, and calls them brother! Talk of Byron's "laying his hand upon the mane" of ocean, and experiencing a poetic rapture—it is but *one* beautiful simile, the war-horse. The enthusiastic naturalist not only rolls his eye from earth to heaven, from heaven to earth, in a fine frenzy, but in grand and familiar harmony. He does not give, it is true, to "airy nothing a local habitation and a name," but he knows both the habitation and the name of every thing that nature presents to his eye. A single simile! why nature is full of symbols and types, and groups, and associations, of the most grotesque, unique, grand and varied characters. She delights in nothing more than in producing, at once, great uniformity and unbounded variety. But we must come to our subject.

The object of the following sketch, CHARLES A. LEE, M.D., was born about the year 1802, in the town of Salisbury, Ct. His father was "a well-to-do farmer," and had been an officer in the revolutionary war. His grandfather, Rev. Jonathan Lee, is said to have been the first settled congregational minister in the above town. Until the age of 13 years

Charles obtained his education in the common district schools, when, with the assistance of a private tutor, he began the study of the ancient languages. He afterwards became an inmate of the family of his uncle, Elisha Lee, Esq., of Sheffield, Mass., who was an early graduate of Yale College, a distinguished classical scholar and advocate, a polished gentleman and a devout christian. After enjoying the benefits of his instruction in the Latin and Greek languages, and in English literature, for more than a year, he was sent to Lenox Academy, a celebrated school of learning, then under the charge of the eccentric Mr. Gleason. He continued here more than a year, prosecuting his studies with unwearied diligence; devoting in fact but little time to the relaxation so necessary in growing boyhood. His health became materially affected by this continued devotion to study.

In 1817 he entered Williams College, in Williamstown, Mass., in an advanced class, and graduated with distinguished honors in 1820. During his college studies his attention was by no means confined to the ordinary routine of the classes, but the Greek and Latin historians, as well as English literature and science, were eagerly devoured by him. He also had acquired that taste for the natural sciences which has so eminently distinguished his riper years. These studies were carried on under the direction of Prof. C. Dewey. Another year spent in the city of New York, and we find him in the office of his brother-in-law, Dr. Luther Ticknor, of Salisbury, studying medicine. He graduated in 1825, after attending three full courses of lectures in the medical institution at Pittsfield. The last two of these sessions he officiated as demonstrator of anatomy.

After practising a short time with Dr. Ticknor, he removed to New York city in 1826, and commenced the practice of his profession in earnest. He soon exhibited his spirit for enterprise by—in connection with Dr. James Stewart—founding the Northern Dispensary of that city. For four years he acted as attending physician, prescribing for more than 2000 patients per annum. He was, on retiring from these labors, appointed consulting physician, which office he continued to hold until quite recently, his private practice becoming too onerous to attend to the prescribing for so many public patients. His diligence in noting cases and making post-obit examinations, was untiring. He found time, by way of relaxation, to prepare a popular and scientific work on Geology, for the "Harper's Family Library." Another school-book from his pen, on Physiology, soon after appeared, both of which have had, and now have, a very extensive circulation. The latter, with those of Coates, Smith, and others, has tended much to create the taste, now so general among the people, for physiological science. The Medical Journals were continually supplied with his cases, original articles, reviews and monographs—when, indeed, have they *not* been, since he began to wield his ever-moving pen! Among his monographs, were, an elaborate essay on the Thymus Gland, on the Medical Statistics of New York city, an Essay on the Diseases of Clergymen, &c. &c. &c. He also published a series of essays on the effects of the arts, trades and professions, on health and longevity, in the Eclectic Repertory, of New York,

which did much to awaken public attention to the subject of hygiene and medical police.

In 1832 he was appointed, by the board of health, physician to the Greenwich Cholera Hospital, where he chiefly resided until the close of the epidemic. He was also physician to the New York Orphan's Asylum.

In 1840 he originated the "New York Journal of Medicine and the Collateral Sciences," associating with him the late lamented Dr. Forry; to whom, in fact, in consequence of his other professional duties, he resigned the editorial chair, which was however resumed at the death of Dr. F. He never declined furnishing an article when requested, and indeed contributed freely to the Journal. He continued the editorship of this widely-circulated Journal up to 1848. During all this time he wrote for its pages, attended to an extensive and increasing practice, and brought out, in rapid succession, two large volumes of Copland's Medical Dictionary, with copious notes and additions; and wrote some sixty lectures on General Pathology, and as many on Materia Medica. He edited Guy's Medical Jurisprudence, which he enlarged to nearly twice its original size. Paris's Pharmacologia and Thompson's Conspectus were edited, and nearly two thirds of the matter in the last work was added, by Dr. Lee.

In 1844–45 he was appointed Professor of General Pathology and Materia Medica in Geneva Medical College. Previous to this he had assisted in the organization of the medical department of the University of New York, and was appointed to the chair of Materia Medica and Therapeutics. He however declined before the institution went into operation.

In 1847 he lectured in the Starling Medical College, at Columbus, Ohio; and the same year was appointed to the chairs of Materia Medica in Brunswick (Maine) Medical College, and in the University of Buffalo. His health having become impaired by these excessive labors, the intervals between the lecture terms, during the last three years, have been spent mostly in travelling. One summer was spent in the Lake country, exploring the whole copper regions of Lakes Superior, Huron, Michigan, &c.: his notes of which are as yet unpublished. The summer of 1849 was spent in travelling over England, Ireland, Scotland, the Western Islands, and France; a month was spent in Paris.

Dr. Lee has a well-selected library of some three or four thousand volumes. His acquaintance with American literature is perhaps as accurate as that of any medical writer in our country. He has an herbarium of some 1500 species of plants, collected with his own hands. His catalogue of the medical plants of the State of New York, is, and will continue to be, a monument to his industry and learning. The students of Geneva College will long remember his accuracy and kindness in explaining the plants which they collected from day to day during the present Spring session of that institution. He is an honorary member, we believe, of most of the scientific societies of this country and many of those of Europe.

The mineralogy and geology of Salisbury received attention from Dr.

Lee in an article in Silliman's Journal. Pereira's celebrated work on food and diet was edited by him, and received from his pen copious notes; and what is very creditable to him, the copyright was secured and its entire avails awarded to the author in England.

The temperance reform acknowledges in Dr. Lee a staunch friend and able defender. His pen has produced many able articles, which have been published in Boston, Albany, and New York city, on this subject. He has also delivered many public temperance addresses and lectures.

To Dr. Lee is due, we believe (at least we have seen no prior publication), the credit of first openly advocating, in the pages of his journal, the subject of a National Medical Convention. The medical schools were at that time, as Cato pretty well knows, generally opposed to the measure, but have since come into it heartily. He also, long before any general movement was made in the matter, called the attention of the profession, in several articles on the subject, to the immense adulteration of drugs in the New York and other American markets. His devotion, in fact, to everything calculated to elevate his beloved profession, is unremitting.

As a lecturer. he is clear, terse and impressive. Having plenty of matter already written, he is at no loss for material, but is exceedingly happy when, throwing away his carefully-written manuscript, he lets loose the current of his unharnessed thoughts. His humor is inexhaustible and irresistible, and he can, at will, chain the attention of the class by the expression of wit, pathos, literary and scientific anecdote, or instructive detail and narrative. He is, at once, respected and loved; the poorest and most dependent student will confide in Dr. Lee, and the most accomplished will desire to learn from him. A consistent member of the Episcopal church, his religious character is as pure as his literary and scientific attainments are brilliant. About five feet eight and a half or nine inches in height, broad shouldered, with a strong frame; hair of a *salt and pepper* grey, separated on one side of his forehead; a large Roman nose, dark-blue eyes, and *a well-developed chin;* a voice which is low and gentle; manners quiet and rather retiring, more inclined to listen than to take the lead in conversation; moderate and judicious in the expression of his opinions, and never violent or personal; with a gait which may be denominated a *good long swing*—and we have Dr. Lee.

Of such men, Cato thinks the medical profession of the United States, or of the world, ought to be proud—a true and beautiful specimen of what a physician ought to be.

CATO.

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## DR. DICK'S ALPHABETICAL NOTICES OF SUBJECTS CONNECTED WITH THE TREATMENT OF DYSPEPSIA.

[Continued from page 304.]

ILEUS.—Ileus or the ileac passion (or suffering) derives its name from the circumstance that the seat of the affection is often in the ileum. And perhaps, in a correct nomenclature, the ileac passion, with its attendant

phenomena of obstruction to the passage of fæces downward, and their ejection in vomiting—the whole depending on intus-susception, would form a distinct disease, known by a single and distinct name. At present, stercoraceous vomiting, arising from strangulated hernia and several other causes, is described as ileus. Our very brief observations will apply principally to the ileus of intus-susception.

The diagnosis, to a certaint extent, of this form of ileus, is not difficult. There is severe griping pain of a fixed character. The alvine evacuations are suspended. The abdominal muscles are violently and irregularly contracted (at least in many cases), and there is often a distinct tumor, whose seat is usually the right ileac region. When, in addition to the symptoms just enumerated, stercoraceous vomiting declares itself, any doubts which may have existed are at an end. We are at least sure that there is a dangerous interruption of the bowel, though whether dependent on an internal hernia, or the looping of the intestine, or some displacement of the mesentery, &c., we may not be able to determine. This, therefore, is a disease emphatically justifying, or rather calling for, expectant treatment; since means which might be suitable in ileus of one origin would be injudicious or fatal in another.

But even if we should be able to satisfy ourselves (a matter far from easy) that it is on intus-susception that the symptoms before enumerated depend, it is almost impossible to decide whether the invagination be what has been called a progressive or downward one, or a retrograde or upper one—that is, whether the inverted portion of the bowel is being pushed downward or upward; and it is important to do so, since these require opposite modes of treatment: the trial of purgatives, &c., being justifiable in the former case; of emetics in the latter. In progressive intus-susception we may try (as we have said) various kinds of purgatives, as, for example, castor oil, calomel, &c. We have seen advantage from oil of turpentine. Drastic purgatives, such as gamboge, elaterium, &c., we should not recommend. This is the form in which quicksilver is suitable—if suitable in any case; and we found it perfectly successful in one very formidable case in which we prescribed it.

But all our means should be gentle; we should push nothing, unless, indeed, we should see some unequivocal evidence that a particular measure gives promise of being successful.

One antispasmodic and emollient glyster may be tried, one purgative administered, and at the discretion of the practitioner, as exercised on the particular case, quicksilver may be had recourse to. After such an interval as allows opportunity for the due effect of these means, we should suspend active measures, enjoin absolute quietude, secure this by decided opiates, and then watch the event.

Such is our whole plan of treatment in obscure cases of ileus. It may seem miserably wanting in variety of resource, and the prognosis on which it may be presumed to be founded may seem dreary, but we are certain that just in proportion to the practical experience of the reader will he be satisfied that we have said nearly all that need be said.

We would not object to a cautious trial of a smoke or infusion clyster of tobacco, nor even to that of Stanius and Becker, consisting of four parts

of the root of belladonna, infused in 200 parts of water, which, however, has been found inert. But after the gentlest *tentative* endeavors to restore the normal action and condition of the bowel by emetic, purgative and injection, singly or conjointly, we should trust chiefly or entirely in opium, by which we would seek to arrest the morbid action of the bowel, hoping that afterwards nature would gradually disentangle the invaginated part. We have known most formidable cases in which absolute quietude for several days (the same posture, reclination on the back, being all that time maintained) succeeded, even without opium.

*Iodine.*—We have persuaded ourselves that advantage is, in some cases of indolent enlargement of the liver, *without* tenderness on pressure, to be obtained from iodine and its preparations. In such cases we consider the hepatic enlargement to be, in some measure, œdematous, or to depend on a gorged condition of the portal or hepato-venous vessels. We have also seen benefit from the use of the preparations of iodine in the furred and foul state of the tongue and (presumptively) of the stomach which often occur in gouty subjects, the derangements just named being accompanied by deposits of uric acid and urate of ammonia.

*Iron.*—We notice iron here, because its use is of sovereign efficacy in one disease, attended with a more remarkable perversion of the gustatory organ and the stomachic instincts than any other. We refer to chlorosis, in which, as is well known, cinders, chalk, glass, and common earth, are sometimes craved and eaten.

There is reason to suspect that this depraved sensibility of the tongue and stomach depends on a peculiar affection of the gastric branch of the par vagum—perhaps, also, of the sympathetic, induced (it is supposed) by that condition of the blood in which there is a manifest deficiency of the red globules. As these contain iron, it is evident that in administering it medicinally in this disease, we directly, almost mechanically and tangibly, act on this deficiency, in so far as we throw into the circulation a constituent of the blood, the proportion of which is below par.

There occur other cases, not peculiarly of an anæmic or chlorotic character, but of general muscular and nervous debility, and in which the digestive function partakes of the universal feebleness. In such circumstances chlybeates suit the stomach, on the principle that what benefits the whole must benefit a part.

In stomachic neuralgia or gastrodynia iron is useful; but perhaps it is here inferior to the tris-nitrate of bismuth, to the nitrate of silver, and even to the oxide of zinc, combined with aconite or hyoscyamus.

*Jalap.*—This purgative acts chiefly on the small intestines, and is somewhat hydragogue in its effect. It is rather disagreeable to take, and is apt to produce nausea. With these exceptions, it is a safe, expeditious, and efficient cathartic.

*Kidney.*—In a series of papers intended to illustrate the best methods of treating dyspeptic derangements, it would be an oversight to omit notice of the kidney in its pathological relations to the stomach.

In animals, the extirpation of the kidneys is followed by inflammation of the liver and formation of urea in the blood, besides other consequences. Now, a merely remiss action of the kidneys must tend to pro-

duce these results in a less degree. There can be little doubt that the gastric secretions are morbidly influenced by inefficiency of the renal secretion. Even in healthy saliva, Schultz believed that he found ammonia, though Mitscherlich controverts this view; but sure I am that in arthritic and rheumatic subjects, during the incubation of attacks of their peculiar diseases, ammonia, in some combination or other, is copiously excreted by the salivary glands and the mucous membrane of the stomach. During the said incubation of gout or rheumatism, the secretion of the kidney is almost suspended, both quantitatively and qualitatively. We must, therefore, suppose that the urinary salts, such as the urate and phosphate of ammonia and the urea, unable to escape by their natural outlet, seek egress by the salivary and gastric glands and the liver, occasioning no small derangement there. This is certain, that no sooner is the full action of the kidney re-established, with (as happens after such suspension) a copious elimination of the salts above named and of uric acid, than the stomachic derangement vanishes, the tongue becomes clean, the mucus, lately thick and glutinous, becomes thin, and the breath loses its offensive odor.

Hence, in treating dyspeptic derangements, attention to the state and action of the kidney is of importance. If simultaneously with a foul state of the tongue, acidity, ammoniacal eructations, &c., there is scanty and high-colored urine, let us, by way of illustrating the frequent efficacy of treating stomachic derangements through the kidney, order a few draughts containing wine of colchicum and nitrate of potass, and we shall have cause to be satisfied with the result.

*Lacteals*—the chyliferous absorbents of the intestines. Many points connected with the function, anatomy and pathology of these vessels and their glands (as they are called) are still imperfectly known. It is probable that in its course along them an important maturating process of the chyle takes place, by which it is more assimilated to the blood. What are named the mesenteric glands, seem to be a mere provision for securing a prolongation of surface in a compendious manner—these glands being nothing else than convolutions of the lacteal vessels, kept compact in a coat of cellular membrane and peritoneum, as on a larger scale the convoluted intestines are kept compact in a great sac of bony frame-work and muscle, viz., the abdominal cavity.

From causes which we cannot appreciate, the strumo-tubercular diathesis often manifests itself structurally in disease of these glands. A chronic inflammation of a peculiar and very intractable kind, issuing in suppuration of a sort of inspissated pus, takes place. The passage of chyle is gradually interrupted, and the patient perishes of marasmus and inanition.

We have found in these cases, quinine, conium and iodine, the means chiefly to be relied on, with frictions of camphorated oil to the spine and abdomen, warm clothing, tepid salt-water baths, nutritious food and country air. The iodine need not be in large doses, and should be given for a fortnight, omitting it for a week, and then resuming it. The conium also may be re-placed occasionally with hyoscyamus, and the quinine with gentian or taraxacum in large doses.

*Leontodon.*—(See *Taraxacum.*)

*Lettuce.*—The inspissated juice of both the lactuca sativa and virosa is employed, but the garden lettuce only is employed as an esculent.

There is no doubt that this plant possesses mild hypnotic properties, without any objectionable effects; at least, when given in the doses usually prescribed. The form called lactucarium is the best.

We have never witnessed any diaphoretic effects from the preparations, as some profess to have done. The bitter extractive makes it eligible as a tonic, while its lactucin operates sedatively, in a very mild degree. This peculiar combination gives it a superiority over many other vegetable bitters, some of which (as gentian, for instance) are tonic without being sedative; and others (as hyoscyamus) are sedative without being tonic.

*Lichen Islandica.*—(See *Iceland Moss.*)

*Limones.*—The fruits of the citrus medica. This species of fruit is indicated in derangements of the liver, in jaundice, more particularly in hyperæmic and torpid states of that viscus; in anorexia, in scorbutic disease, in all inflammatory and febrile complaints.

*Lithic Acid.*—(See *Uric Acid.*)

*Liver.*—That the liver, if an *ex*-crementitious viscus at all, is, at any rate, far less so than a *re*-crementitious one, is evident from the fact of its being placed so far up the *primæ viæ*. Immediately on the chyme leaving the stomach, it is met by the bile, which is necessary to the formation of chyle, of which fluid the bile forms so intimate and blended a constituent, that we can no longer determine how much of the combined current is to be referred to an hepatic or a stomachic source. Differently from the bile, the urine (a purely *ex*cretory secretion) is discharged into a receptacle with a very short conduit, and without that extensive arrangement for absorption prepared for the bile, as it passes onward to the great intestines. While all that is secreted into the bladder is meant to be extruded, much of the bile is no doubt intended to be reabsorbed, such as the albuminous and caseous matters, and (among the saline matters) the phosphate and muriate of soda. Among the excrementitious residue are, the coloring ingredient, the biliary resin, cholesterine, picromel, &c., though part probably of these enter into the formation of the chyle. It appears to us probable, for reasons which it is needless to state here, that a good portion of the potash of the bile is excrementitious.—*Lancet.*

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THE BOSTON MEDICAL AND SURGICAL JOURNAL.

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*Suffolk District Medical Society—Its Meetings for Medical Improvement.*—This Society continues its regular meetings on the last Saturday evening of every month, without diminution of interest, or attendance, on the part of members. The last meeting took place May 29th, at 8 o'clock, Dr. Jeffries presiding. Our limits forbid as full a report, as

justice to the gentlemen and the subjects they introduced, would require. We presume, therefore, upon their indulgence, if but a partial account of the proceedings is given.

Several pathological specimens of great interest were exhibited and demonstrated, with the cases medical and surgical.

By Dr. J. Mason Warren, one showing *intus-susception* of the *small* into the *large* intestine—the *ileum* into the *cæcum*—from 12 to 18 inches of the former being forced within the latter. Death, in 36 hours from the commencement of the symptoms.

By Dr. Henry J. Bigelow—an *ovarian tumor*. From its principal cyst were evacuated 25 pints of albuminous fluid; the whole weight of the tumor 21 lbs. At the time of the operation it was found adherent, both to the peritoneum and omentum. The adhesions were broken down, the mass drawn out and detached, and (tying the vessels separately being abandoned on account of their number) a double ligature placed around its pedicle. Some bleeding vessels of the omentum were also secured, and the parts returned within the pelvis. The incision was closed by sutures. For 18 hours the patient promised to do well; but the weather and a broken constitution were unfavorable, and she died. On examination, there was found peritonitis, with effusion, but no hæmorrhage as is usual. Furthermore, there existed extensive disease of the kidney, which of itself precluded a favorable termination.

Also, by Dr. Bigelow, an hypertrophied and extensively diseased jaw, being the greater portion of the lower one, removed from a girl of 12 years. The bone was sawed through by the external maxillary artery, on one side, and disarticulated on the other. In the operation, the lining membrane of the mouth was not divided until the dissection of the exterior soft parts was complete, thus avoiding a flow of blood into the mouth and throat; and by pushing back the integuments at the angle of the jaw, disarticulation was accomplished without dividing the facial nerve. The patient is now (two weeks since the operation), fast recovering, and her appearance an improvement upon her former condition.

Dr. B. also exhibited an adipose tumor, removed from one of the *labia pudendi* of a young married woman, where it appeared *pendant* between her thighs, like a large scrotum.

By Dr. J. B. S. Jackson, a prostate gland and bladder, extensively diseased—taken from a patient of Dr. Jeffries, by whom a detail of the case was given. The disease had existed for 18 years, with no great suffering till four days before death, when retention of urine occurred. The bladder was soon felt as a solid tumor reaching up to the *umbilicus*. With great difficulty, owing to enlargement of the *prostate*, a catheter was introduced, but only blood, having a urinous smell, was evacuated. On examination, post mortem, the *prostate gland* was found greatly and irregularly enlarged, the bladder exceedingly thickened, its interior sacculated; within the sacs, and held *in situ* by bands like the *chordæ tendinæ* of the heart, were several *calculi* of a peculiar polished appearance; smaller *calculi* were also found in the prostatic ducts.

Dr. G. S. Jones reported a case of cholera, supposed to be the first this season. The subject a male, American, 60 years of age, temperate, living in a crowded and ill-ventilated quarter—was found in a state of collapse, almost pulseless, having rice water dejections, cold, blue, &c. Previous diarrhœa for 5 days, to arrest which Richardson's bitters had been taken, with the effect to aggravate the symptoms. The usual remedies, resorted

to without avail, there being no appearance of re-action. For three hours before death, no pulse. Patient, first seen at 3½ o'clock, A. M., died at 4 o'clock, P. M.

Dr. Jackson mentioned a recent fatal case of cholera morbus, occurring in the practice of Dr. Hyndman. Bilious diarrhœa and collapse three hours before death, which took place in 48 hours from the commencement.

Dr. Channing reported a case of craniotomy, and delivery afterwards, by turning, in a protracted labor, attended by great exhaustion.

By Dr. C., also, a case of uterine hæmorrhage, following sudden suppression of the menses from cold, in which dissolution was threatened.

By the same gentleman, a case of supposed polypus of the uterus.

Dr. Abbot, a case of *carbuncle*, five by two inches, situated on the adductor muscle of the thigh, which the patient had steadily refused having *incised*. His prognosis was at fault, when, instead of the vesication and sloughing which impended, at a subsequent visit he found that the livid redness of the skin had disappeared, the doughy *feel* departed, and the diseased process seemed altogether suspended, nothing remaining but a firm diffused swelling, which gave no inconvenience to the patient.

Dr. Durkee, who saw the above case, remarked upon the unusual course it had pursued, very unlike one, in the same situation, he had treated a few weeks previously.

By Dr. Dix, a case of *intermittent* strabismus, of several years standing. Regular intervals of inversion are observed, which continue 13 days, and the eye is afterwards *straight* during 9 days. The patient is forewarned of the coming inversion (which process is completed in three minutes) by the occurrence of double vision. Treatment external and internal was tried without effect, but an operation afforded relief.

Dr. Abbot mentioned a case of a young lady who has strabismus every other day.

Dr. Buckingham had met with two cases of peritonitis, coming on in 8 hours after cauterization of the *cervix uteri* had been practised. The disease yielded, in a few days, to free doses of morphine and quinine. This occurrence he attributed to the presence of erysipelas in the same ward (hospital of the House of Industry). The morbid condition of the uterus, in these cases, had been found much improved. Remarks, respecting the operation of *cauterization* of the uterus, the agent employed and its form, were offered by Drs. Perry, Jeffries, Channing, Abbot and Durkee.

Dr. J. Ware referred to this operation as a remedy for amenorrhœa.

Dr. Homans had employed it in a case of menorrhagia.

Dr. Jacob Bigelow remarked upon the great tolerance on the part of the uterus, under the application of irritating agents. He knew a case where nitrate of silver had been used thus, 70 times within a period of six months, and with but temporary discomfort.

Dr. Jeffries related an instance, in which was taken, by mistake, *two ounces and two drachms of laudanum*. He saw the patient in 25 minutes. In the mean time some vomiting had occurred, and the prompt operation of a mustard emetic caused the discharge of what remained in the stomach. The patient was kept in motion for three hours, and afterwards allowed to indulge in sleep, from which, however, she could be easily roused. The laudanum was probably of full strength, coming, as it did, from one of our best apothecaries.

Another instance was reported, of mistake, by an apothecary, whereby was given one and a half ounce of laudanum, instead of wine of ipecac.,

its only effect being to cause the man who drank it to sleep beyond his usual hour the next morning.

Other similar instances came up, which, together with a statement, that a recent analysis by A. A. Hayes, Esq., of samples of laudanum from different shops, had given a quantity of opium varying from 10 to 20 grains to the ounce, lead to the supposition that apothecaries provide themselves with two qualities of this article—one, for the *prescription* of the *physician*, and the other for *unprofessional* consumption. E. W. B.

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*Massachusetts Charitable Eye and Ear Infirmary.*—This new edifice in Charles street, Boston, was dedicated on Wednesday last, with appropriate services. Dr. Edward Reynolds delivered the address, which was replete with interest. He gave the history of ophthalmic medicine and surgery from its earliest date, and contrasted it with the methods of practice of the present day. He then spoke of the institution in Boston, which originated in the enterprise of one or two medical gentlemen, who not only gave their services, but defrayed the expenses of a room and furnished medicines. Soon after, a charter was obtained, and by the liberality of some of our wealthy citizens, the institution was in a short time in a condition to bestow the greatest benefits upon the applicants for treatment. From the commencement up to the present time, upwards of twenty-five thousand patients have been treated, one thousand of whom have been residents during treatment at the Infirmary. The funds have accumulated from $2600 to upwards of $92,000. A just and feeling tribute was paid to the memory of those who, by their generous donations, have placed the institution in its present prosperous condition. He also alluded to the services of the surgeons, who had been in attendance for the last fifteen years without any compensation, save the consciousness of doing good to the suffering poor. Dr. Reynolds's address was well adapted to the occasion; and the appeal which was made to our wealthy men for the further bestowal of their bounty, we trust will have the desired effect. The new building is admirably located, and its architectural appearance, though perhaps not what every one would desire, is nevertheless of an imposing character. The interior is admirably adapted to the wants of its inmates, and it would appear to have every advantage that could be wished in an institution of the kind. Drs. Hooper and Bethune will continue to be its surgeons, and none more competent for the purpose could be found.

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*Eastern Asylum for the Insane, Williamsburg, Va.*—The report of the directors, physician and superintendent of this institution, has been received, and from it we learn that the whole number of admissions during the last year was 215. Of these, 125 were males and 90 females. Number of discharges, 9; deaths, 25. The report is well drawn up, and shows the institution to be in a flourishing condition. It also appears from it that Miss Dix, the philanthropist, has not "passed by on the other side" of this Asylum, but, as usual, called and left something for the comfort of its inmates.

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*Cod-liver Oil.*—Much difficulty has existed in obtaining pure cod-liver oil. The demand has been so great, that unprincipled persons have been induced either to adulterate it or substitute inferior fish oils for it. The consequence has been to intimidate the practitioner in making use of this

so generally considered valuable remedial agent. Druggists in general have been in the habit of depending upon fishermen for their supply, supposing they perfectly understood the best method of obtaining the oil. It appears, however, that all of them do not, and some of our principal druggists have undertaken to manufacture the oil themselves from fresh cod's liver, which is daily received for that purpose. A sample exhibited to us is certainly as beautiful as any we have ever seen; and as to its purity, it stands the test for pure cod-liver oil, which was published in the Journal some time since. It was manufactured by Mr. Wm. B. Little, 101 Hanover street, and we feel warranted in saying that physicians may rely upon that which comes from his establishment.

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*The Case of Prof. Webster.*—As will be seen by reference to our last page, another development has been made in this melancholy affair. In the petition for a full pardon which was sent to the Governor in April, and since withdrawn, Dr. W. declares in the most solemn manner that he is "entirely innocent of this awful crime;" and that he "never entertained any other than the kindest feelings towards Dr. Parkman," whom he had long numbered among his best friends. He also appeals to Him who seeth in secret for the truth of his declaration that he had no agency in placing the remains of a human body in or under his rooms in the Medical College, nor did he know who placed them there. On Friday last, the wife and three daughters of Prof. W. visited the Governor and Council, principally it seems to state that this petition was drawn up and presented at their own urgent solicitation, they then firmly believing in its truth. The Rev. Dr. Putnam was at the same time called upon for further explanations in regard to Dr. Webster's confession, which will be thoroughly examined and considered. It is also understood that the opinion of several surgeons has been solicited, whether death could be caused by the means and in the time specified by Dr. Webster. Another meeting is to take place to-day (Monday), and it is not improbable that a final decision on the fate of the unhappy prisoner, whose case has lost none of its painful interest under the new aspect in which it is now presented, will be made before this number of the Journal is circulated. The following is the petition now before the Governor, being presented by Dr. Putnam at the same time Dr. W.'s confession was made known—which confession was revealed to Dr. P. without any understanding of the use which was to be made of it.

John White Webster, a convict, under sentence of death, in Boston jail, in behalf of himself and of his wife and children, respectfully petitions, that the sentence awarded against him by the law may be commuted to such other less horrible and ignominious punishment as your honorable body may mercifully decree.

Your petitioner fully admits that he was tried before a fair and impartial tribunal, and that under the law as it exists, his jury, composed as it was of honorable and high-minded men, could have returned no verdict other than they did. But he respectfully reminds your honorable body, that the two great moral ingredients of the crime of murder, malice and premeditation, have never been found against him by a jury, but have been necessarily inferred by the arbitrary rules of the law, from certain general facts which your petitioner will not deny, but the extenuating details of which, no man in your petitioner's situation can ever possess legal evidence to prove. These details your petitioner has confided to the friend who presents his petition, with authority to state them to your honorable body, in the hope that you will find therein reason to extend to your petitioner and his family that mercy of which the law has made you the dispensers.

*Registration Law.*—A circular from Dr. Joseph Mauran, of Providence, R. I., Chairman of the Registration Committee, commends itself to the consideration of legislators and others. The adoption and enforcement of such a law has always been recommended in this Journal. A perfect genealogical record will in this way be obtained and preserved, which will be invaluable to future generations. Medical and scientific men have an especial interest in such matters; and knowing the importance of registration laws in all the States, they should exert themselves to their utmost until the wished-for object is attained. The new law of Rhode Island went into operation on the 1st of June. Dr. Mauran says—

"To medical and scientific men it is not deemed necessary to enter into a minute detail of the many advantages resulting to science, the profession, and the community at large, through the agency of a perfect system of registration; their professional and popular readings having rendered the subject to them perfectly familiar, and its uses, particularly in other countries, well authenticated and established. Permit us simply to state, therefore, that in the arrangement of the blanks, with which you will be furnished by the Secretary of State through the several town clerks, a two-fold object is presented. *Firstly*, To identify fully and conclusively every individual who is born, marries or dies in the community, for genealogical and municipal purposes. *Secondly*, To demonstrate the results of age, profession, occupation; climate, season and residence, upon the great subject of health, life and longevity—objects of the highest importance to every individual in society."

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*Medical Miscellany.*—There have been admitted to the Retreat for the Insane, in Hartford, Conn., since 1824, over two thousand patients, half of whom have been discharged cured.—The Water Cure Journal, published by the Messrs. Fowlers & Co., New York, has just entered upon its tenth volume. The picture upon the title page is very significant, and must please those who delight to *play* in the water.—There were vaccinated by the Boston City Physician, at the city's expense, during the last quarter, 1514 persons.—Mrs. Loman A. Burnett, of Belchertown, Ms., gave birth to three daughters on the morning of July 4th. The mother and two of the children are doing well; the third child lived but a short time.—Among the many accidents recorded from the dangerous and illegal use of fire-crackers on the 4th of July, was one to Dr. H. O. White, of Salem, who was thrown from his carriage in consequence of his horse being frightened by a cracker, and very severely injured.—The Southern Medical Journal very properly asks the question whether, in the matter of charging newspaper postage at Washington on the African Repository, a monthly covered periodical, and pamphlet postage on weekly unstitched medical journals, "the affairs of Africa and the interests of the African race are deemed of more importance than the physical welfare of our own people."

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DIED,—At Morristown, N. Y., Dr. A. Woodruff, aged 59 years.

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*Deaths in Boston*—for the week ending Saturday noon, July 6th, 54.—Males, 31—females, 23. Abscess, 1—accidental, 2—anemia, 1—apoplexy, 1—disease of bowels, 1—inflammation of bowels, 1—disease of brain, 1—bronchitis, 1—consumption, 6—convulsions, 2—cholera, 1—canker, 2—croup, 1—child-bed, 2—dysentery, 3—diarrhœa, 1—dropsy, 1—dropsy of brain, 1—typhus fever, 1—lung fever, 2—brain fever. 1—hooping cough, 1—infantile diseases, 2—disease of kidneys, 1—marasmus, 2—measles, 1—old age, 2—smallpox, 9—scalded, 1—suicide, 1—teething 1.

Under 5 years, 19—between 5 and 20 years, 3—between 20 and 40 years, 16—between 40 and 60 years, 6—over 60 years, 5. Americans, 27; foreigners and children of foreigners, 27.

*Confession of Prof. Webster.*—It is already well known to most of our readers that an effort has been made to have the sentence of death, under which Dr. Webster now lies, commuted to one less severe and ignominious. This effort is grounded on the confession which Dr. W. has lately made to his spiritual adviser, the Rev. Dr. Putnam, that he killed Dr. Parkman, but that the act was done in a sudden fit of passion and was wholly unpremeditated. The matter was brought before the Governor and Council in this city on Tuesday of last week. After premising that a petition under Dr. W.'s own signature, sent to the Governor in April, and soliciting a full pardon, with the most solemn protestations of innocence, and entire ignorance of how the human remains found in his premises came there, was withdrawn by the advice of Dr. Putnam, subsequent to the confession alluded to, which was in May, we give the following brief summary of the latter. For various reasons Dr. Putnam thinks this entitled to credit.

On Tuesday, Nov. 20th. Professor Webster said he sent a note to Dr. Parkman. It was handed to Littlefield, and was unsealed. It was to ask Dr. Parkman to call on me, as he had become quite importunate about his debt. I wished to gain time. I did not expect to be able to pay him on Friday. I expected to state to him my inability, and to apologize for what had occurred and make some promises for the future. I heard on Thursday that he was in pursuit of me, and feared that he had not got my letter. I therefore called at his house and asked for an interview. Dr. Parkman agreed to meet me at the college at half past one o'clock. At the time appointed, he came to the college. He came in at the lecture-room door, and followed me into the laboratory. He asked with great energy, have you got the money? I said, no, doctor, and began to apologize. He would not hear me, and began to load me with opprobrious epithets, notwithstanding all I could say. Afterwards he drew the notes and an old letter from his pocket, and referring to the letter, said, in this letter I recommended you for your present situation, and now I will have you turned out. Dr. Parkman continued gesticulating in the most violent manner, and finally thrust his fists in my face. This caused my passions to rise, and in a moment of uncontrollable anger I seized whatever implement was near, which happened to be a stick of wood, and struck him a blow on the side of the head. There was no second blow. He fell upon the pavement of the room, insensible. Blood flowed from his mouth, but there were no signs of life. I stood over his body ten minutes, and then found that he was dead. My first impulse was to run and bolt the doors, to consider what was to be done. The Professor then states that he first burnt the clothes and papers, with the exception of those found upon him. The watch he afterwards threw over Cambridge bridge. He then took the body to the sink, and dismembered it. He used for that purpose the knife found in the tea chest. The Turkish knife was not used for that purpose. The head and some other parts of the body were placed in the furnace that day, and fuel heaped upon them. The stick with which the fatal blow was inflicted he then picked up, and found it to be a piece of grape vine some two inches in diameter, and two feet long. It was brought in from Cambridge some time previously, for the purpose of trying experiments relative to dyeing wood. Upon the notes he made the marks found upon them with a metallic pen, and put them in his pocket. That night he left the college at 6 o'clock, after having disposed of the body in various places. On Saturday he visited the college, but made no change in the position of the remains. He first saw an account of the disappearance of Dr. Parkman on Saturday evening, and then reflected as to what should be his course. He concluded on Sunday to come into Boston and make the statements which he did relative to the visit of Dr. Parkman to his rooms. On Sunday he visited his rooms. After the visit of the officers, he put part of the body in the privy and part in the tea chest. The tin box was designed to receive the thorax. At the jail, and before leaving the carriage, he took a large dose of strychnia, sufficient to have caused death, had it not been for the excited state of his mind. After he had made the statement, Dr. Putnam adjured him to state, as a man at the point of death, whether, previously to the occurrence, the thought had not occurred to him that Dr. Parkman's death would benefit him. He replied in an impressive manner—No, as I live, I never dreamt of any such thing. My passions have been my besetting sin. I never had thought of injuring Dr. Parkman.